this search is a generic term search

HUI 09/666,146

=> d his

(FILE 'HOME' ENTERED AT 18:06:51 ON 16 APR 2001)

FILE 'HCAPLUS' ENTERED AT 18:07:00 ON 16 APR 2001
L1 2 S KUPKER W?/AU
L2 59 S DIEDRICH K?/AU
L3 1246 S ENGEL J?/AU
L4 18 S FELBERBAUM R?/AU
L5 0 S L1 AND L2 AND L3 AND L4
L6 1297 S L1-4
L7 11602 S ?ENDOMETR?
L8 8 S L6 AND L7
L9 1222 S (LH OR LHRH)(3A)ANTAGONIST?
L10 5 S L9 AND L8
SELECT RN L10 1-5

— inventor search

FILE 'REGISTRY' ENTERED AT 18:09:07 ON 16 APR 2001
L11 18 S E1-18

FILE 'HCAPLUS' ENTERED AT 18:09:18 ON 16 APR 2001
L12 5 S L10 AND L11 5 cites w/ 18 cpds displayed

FILE 'REGISTRY' ENTERED AT 18:15:20 ON 16 APR 2001
L13 1 S 9034-40-6
L14 1 S CETRORELIX/CN
L15 1 S TEVERELIX/CN
L16 1 S ANTIDE/CN
L17 1 S ABARELIX/CN
L18 0 S D-63153/CN
L19 0 S D63153/CN
E D(W)63153/CN
E ORTHO NOVUM/CN

— LHRH antagonists

FILE 'HCAPLUS' ENTERED AT 18:19:12 ON 16 APR 2001
L20 13042 S L13
L21 224 S L14-17
S D(W)63153/CN

FILE 'REGISTRY' ENTERED AT 18:20:00 ON 16 APR 2001
L22 0 S D(W)63153/CN

FILE 'HCAPLUS' ENTERED AT 18:20:01 ON 16 APR 2001
L23 0 S D(W)63153
L24 0 S D-63153
L25 10 S ?63153?
L26 13127 S L20-21 OR L25 ← LHRH antagonists
L27 51 S ORTHO NOVUM
L28 12663 S ?CONTRACEPTIVE?
L29 5045 S L28(3A)ORAL?
L30 162 S L26(L)L27-28
L31 45 S L30 AND L29
L32 148 S FTO OR FALLOPIAN TUBE OBSTRUCT?
L33 922 S FTO OR FALLOPIAN TUBE
L34 93 S PAIN?(5A)(PELVIC OR PELVIS)
L35 2781 S (PELVIC OR PELVIS)
L36 9 S L30 AND (L7 OR L32-35)
L37 2 S L36 AND L29 2 cites
L38 2 S L37 NOT L12
L39 7 S L36 NOT L37 7 cites
L40 9 S L30 AND (L7 OR L32-35)
L41 0 S L40 NOT L36
L42 386 S L26 AND L28
L43 51 S L42(L)(L7 OR L32-35)
L44 42 S L43 NOT L36
L45 37072 S NSAID OR ANTI-RHEUMAT? OR ANALGESIC ← other markush meds
L46 28 S L26 AND L45
L47 69 S L46 OR L44
L48 4 S L21 AND L47
L49 3 S L48 NOT L12 3 cites
L50 90 S L9 (L)L28
L51 2 S L9 (L)L45
L52 11 S L50-51 AND (L7 OR L32-35)
L53 6 S L52 NOT (L12 OR L49 OR L36)
L54 3 S L9 AND L45
L55 1 S L54 AND (L7 OR L32-35)

— claimed diseases

L56 7 S L53 OR L55
L57 6 S L56 NOT L12 ; 6 cites

=> d bib abs hitstr 1

L12 ANSWER 1 OF 5 HCAPLUS COPYRIGHT 2001 ACS
AN 2001:228727 HCAPLUS
TI Method for the therapeutic management of extrauterine proliferation of endometrial tissue, chronic pelvic pain and fallopian tube obstruction
IN Engel, Juergen; Riethmueller-Winzen, Hilde; Felberbaum, Ricardo; Diedrich, Klaus; Kuepker, Wolfgang
PA Asta Medica A.-G., Germany
SO PCT Int. Appl., 31 pp.
CODEN: PIXXD2
DT Patent
LA English
FAN.CNT 1

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI WO 2001021194	A2	20010329	WO 2000-EP9212	20000920

W: AU, BG, BR, BY, CA, CN, CZ, DZ, EE, GE, HR, HU, ID, IL, IN, IS, JP, KG, KR, KZ, LT, LV, MK, MX, NO, NZ, PL, RO, RU, SG, SI, SK, TR, UA, US, UZ, YU, ZA, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE

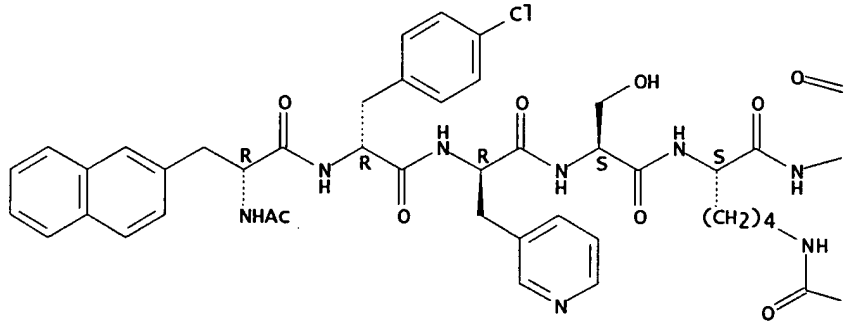
PRAI US 1999-155478 19990923

AB The present invention provides a method for therapeutic management of extrauterine proliferation of endometrial tissue, chronic pelvic pain and fallopian tube obstruction by short term induction treatment with an LH-RH antagonist for 4 to 12 wk. According to another aspect of the present invention, the short term LH-RH treatment is followed by the combined or sep. administration of one or more active agents selected from the group consisting of a contraceptive, preferably an oral contraceptive, a non-steroidal anti-rheumatic agent, an analgetic, an androgen other than a 17-alpha-alkyl substituted testosterone or any combinations thereof. According to a further aspect of the present invention a pharmaceutical compn. comprising an LHRH antagonist and one or more active agents selected from the group consisting of a contraceptive, preferably an oral contraceptive, a non-steroidal anti-rheumatic agent, an analgetic, an androgen other than a 17-alpha-alkyl substituted testosterone or any combinations thereof are provided.

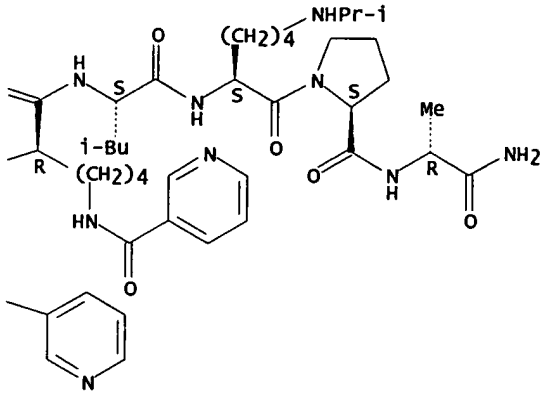
IT INDEXING IN PROGRESS
IT 112568-12-4, Antide 120287-85-6, Cetrorelix 124904-93-4, Ganirelix 144743-92-0, Teverelix 183552-38-7, Abarelix
RL: BAC (Biological activity or effector, except adverse); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(administration of LH-RH antagonist for therapeutic management of extrauterine proliferation of endometrial tissue, chronic pelvic pain and fallopian tube obstruction)
RN 112568-12-4 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-N6-(3-pyridinylcarbonyl)-L-lysyl-N6-(3-pyridinylcarbonyl)-D-lysyl-L-leucyl-N6-(1-methylethyl)-L-lysyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



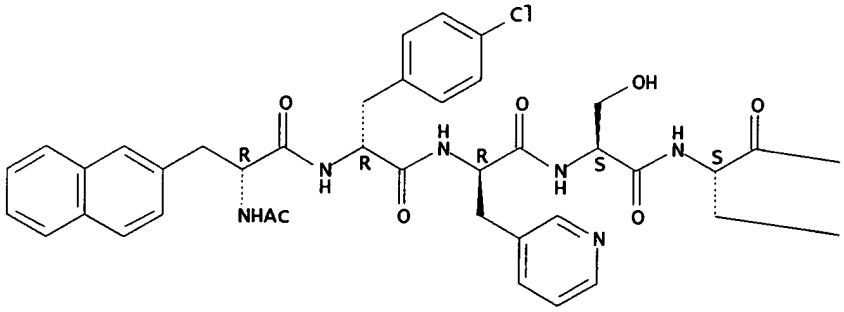
PAGE 1-B



RN 120287-85-6 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-L-tyrosyl-N5-(aminocarbonyl)-D-ornithyl-L-leucyl-L-arginyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



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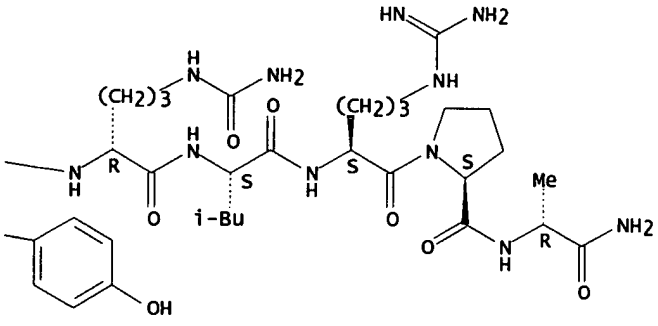
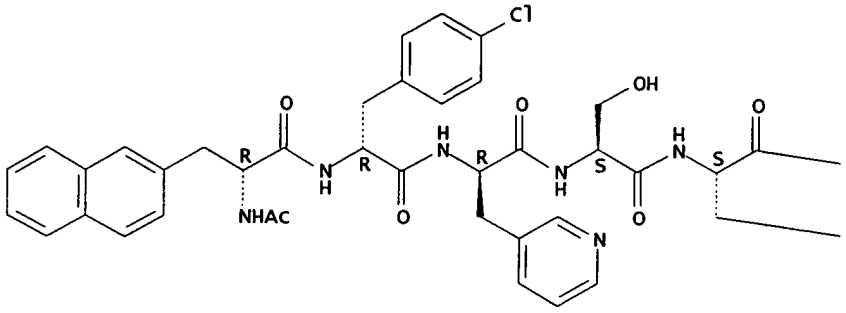


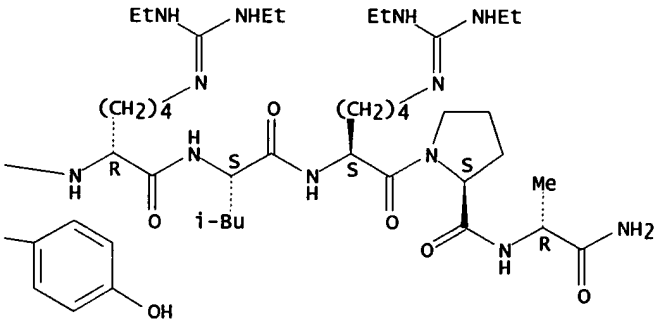
RN 124904-93-4 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-L-tyrosyl-N6-[bis(ethylamino)methylene]-D-lysyl-L-leucyl-N6-[bis(ethylamino)methylene]-L-lysyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



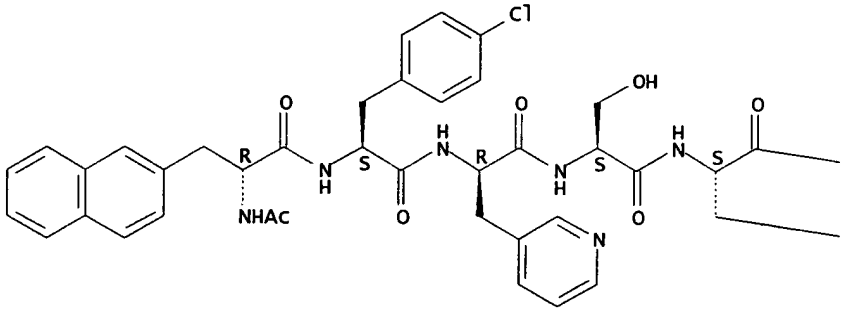
PAGE 1-B



RN 144743-92-0 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-L-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-L-tyrosyl-N6-(aminocarbonyl)-D-lysyl-L-leucyl-N6-(1-methylethyl)-L-lysyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



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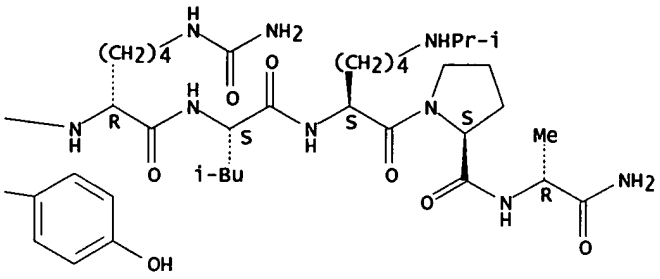
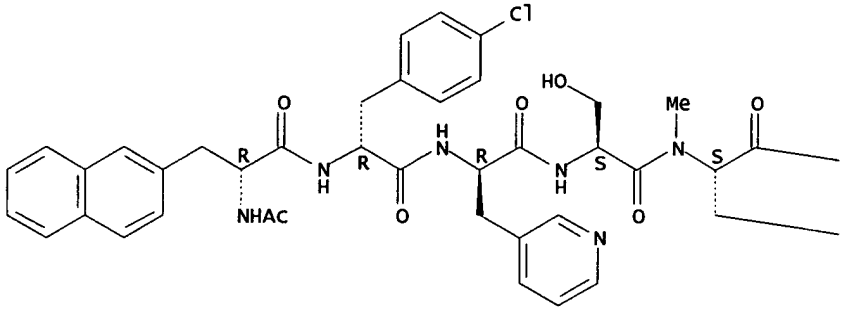


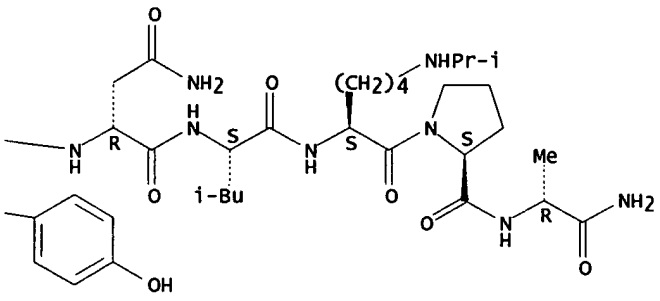
RN 183552-38-7 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-N-methyl-L-tyrosyl-D-asparaginyl-L-leucyl-N6-(1-methylethyl)-L-lysyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



PAGE 1-B



IT 9034-40-6, LH-RH
RL: BPR (Biological process); BIOL (Biological study); PROC (Process)
(antagonists; administration of LH-RH antagonist for therapeutic management of extrauterine proliferation of endometrial tissue, chronic pelvic pain and fallopian tube obstruction)
RN 9034-40-6 HCAPLUS
CN Luteinizing hormone-releasing factor (9CI) (CA INDEX NAME)

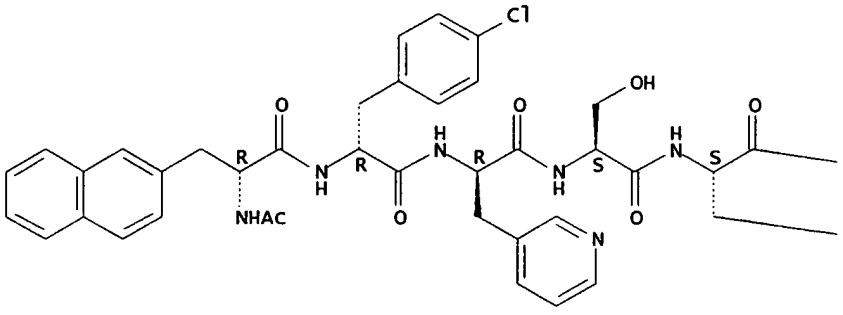
*** STRUCTURE DIAGRAM IS NOT AVAILABLE ***

=> d bib abs hitstr 2

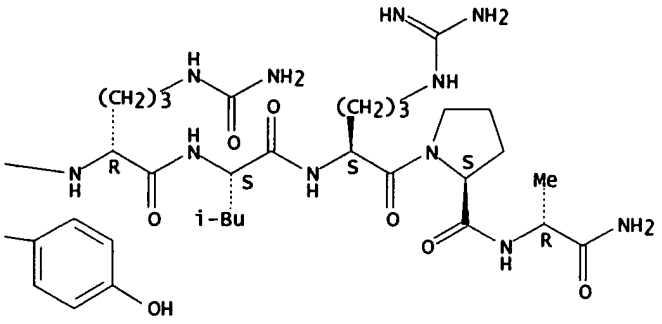
L12 ANSWER 2 OF 5 HCAPLUS COPYRIGHT 2001 ACS
AN 2000:671369 HCAPLUS
DN 134:157602
TI The LHRH antagonist Cetrorelix: A review
AU Reissmann, T.; Schally, A. V.; Bouchard, P.; Riethmuller, H.; Engel, J.
CS Corporate Research and Development, ASTA Medica AG, Frankfurt, D-60314, Germany
SO Hum. Reprod. Update (2000), 6(4), 322-331
CODEN: HRUPF8; ISSN: 1355-4786
PB Oxford University Press
DT Journal; General Review
LA English
AB A review with 58 refs. In those clin. situations in which an immediate and profound suppression of gonadotropins is desired, LHRH agonists have the disadvantage of producing an initial stimulatory effect on hormone secretion. Therefore, the use of GnRH antagonists which cause an immediate and dose-related inhibition of LH and FSH by competitive blockade of the receptors is much more advantageous. One of the most advanced antagonist produced to date is Cetrorelix, a decapeptide which has been shown to be safe and effective in inhibiting LH and sex-steroid secretion in a variety of animal species and in clin. studies as well. Clin. trials in patients suffering from advanced carcinoma of the prostate, benign hyperplasia, and ovarian cancer are currently in progress and have already shown the usefulness of this new treatment modality. In particular, the concept that a complete suppression of sex-steroids may not be necessary in indications such as uterine fibroma, endometriosis and benign prostatic hyperplasia represents a promising novel perspective for treatment of these diseases. Following completion of phase III trials in controlled ovarian stimulation for IVF regimens, Cetrorelix was given marketing approval and, thus, became the first LHRH antagonist available clin.
IT 120287-85-6, Cetrorelix
RL: ADV (Adverse effect, including toxicity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(review of clin. use and pharma-toxicol. of LH-releasing hormone antagonist cetrorelix)
RN 120287-85-6 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-L-tyrosyl-N5-(aminocarbonyl)-D-ornithyl-L-leucyl-L-arginyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



PAGE 1-B



IT 9034-40-6, Luteinizing hormone-releasing hormone
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(review of clin. use and pharma-toxicol. of LH-releasing hormone antagonist cetrorelix)
RN 9034-40-6 HCAPLUS
CN Luteinizing hormone-releasing factor (9CI) (CA INDEX NAME)

*** STRUCTURE DIAGRAM IS NOT AVAILABLE ***
RE.CNT 58
RE
(2) Ataya, K; Cancer Res 1988, V48, P7252 HCAPLUS
(4) Bajusz, S; Int J Peptide Protein Res 1988, V32, P425 HCAPLUS
(5) Beckers, T; Eur J Biochem 1995, V231, P535 HCAPLUS
(6) Behre, H; Clin Endocrinol 1994, V40, P241 HCAPLUS
(7) Behre, H; J Clin Endocrinol Metab 1992, V75, P393 HCAPLUS
ALL CITATIONS AVAILABLE IN THE RE FORMAT

=> d bib abs hitstr 3

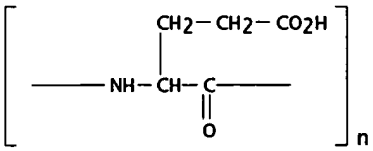
L12 ANSWER 3 OF 5 HCAPLUS COPYRIGHT 2001 ACS
AN 1998:672495 HCAPLUS
DN 129:293891
TI Immobilized activity-stabilized LHRH antagonist complexes and their production
IN Engel, Juergen; Deger, Wolfgang; Reissmann, Thomas; Losse, Guenter; Naumann, Wolfgang; Murgas, Sandra
PA Asta Medica Aktiengesellschaft, Germany
SO PCT Int. Appl., 22 pp.
CODEN: PIXXD2
DT Patent
LA German
FAN.CNT 1

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	WO 9842381	A1	19981001	WO 1998-EP1398	19980311
	W: AU, BR, CA, CN, CZ, HU, IL, JP, MX, NO, NZ, PL, RU, SK, TR, UA				
	RW: AT, BE, CH, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
	DE 19712718	A1	19981001	DE 1997-19712718	19970326
	DE 19712718	C2	19990923		
	AU 9869207	A1	19981020	AU 1998-69207	19980311
	BR 9807887	A	20000222	BR 1998-7887	19980311
	EP 981377	A1	20000301	EP 1998-914877	19980311
	R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				
	US 6022860	A	20000208	US 1998-48244	19980326
	NO 9904665	A	19990924	NO 1999-4665	19990924
	US 6054555	A	20000425	US 1999-422990	19991022
PRAI	DE 1997-19712718	19970326			
	WO 1998-EP1398	19980311			
	US 1998-48244	19980326			

AB LHRH antagonists, esp. cetrorelix, are complexed with suitable biophilic carriers to enable sustained, targeted release of the active substance over a period of several weeks. The acidic polyamino acids, polyaspartic and polyglutamic acids, are selected for complexation with cetrorelix. The cetrorelix/polyamino acid complexes are produced from aq. solns. by combining the solns. and pptg. the complexes which are subsequently centrifuged off and vacuum dried over P2O5, preferably by lyophilization. These acidic polyamino acids display good sustained-release properties in a static liberation system depending on the hydrophobicity and molar mass of the polyamino acids. Animal testing demonstrated the efficacy of the cetrorelix/polyamino acid complexes as a depot system. By complexation of cetrorelix with polyamino acids, testosterone suppression can be achieved in male rats over a period of 600 h. Active substance release can thus be controlled according to polymer type and molar mass.

IT 24991-23-9D, complexes with LH-RH antagonists
25086-16-2D, complexes with LH-RH antagonists
25513-46-6D, Poly(L-glutamic acid), complexes with LH-RH antagonists 25608-40-6D, Poly(L-aspartic acid), complexes with LH-RH antagonists 26063-13-8D , Poly(L-aspartic acid), complexes with LH-RH antagonists 26655-91-4D, L-Glutamic acid/L-phenylalanine copolymer, complexes with LH-RH antagonists 31370-19-1D, L-Glutamic acid/L-leucine copolymer, complexes with LH-RH antagonists 112568-12-4D, Antide, complexes with poly(amino acids) 120287-85-6D, Cetrorelix, complexes with poly(amino acids) 121850-01-9D, complexes with poly(amino acids) 124904-93-4D, Ganirelix, complexes with poly(amino acids) 134457-26-4D, Azaline, complexes with poly(amino acids) 135215-95-1D, A-75998, complexes with poly(amino acids) 151272-78-5D, Antarelix, complexes with poly(amino acids)
RL: BAC (Biological activity or effector, except adverse); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(immobilized activity-stabilized LHRH antagonist complexes and their prodn.)

RN 24991-23-9 HCAPLUS
CN Poly[imino[(1S)-1-(2-carboxyethyl)-2-oxo-1,2-ethanediyl]] (9CI) (CA INDEX NAME)

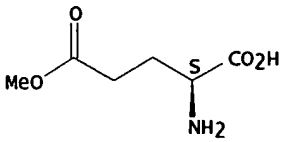


RN 25086-16-2 HCAPLUS
CN L-Glutamic acid, 5-methyl ester, homopolymer (9CI) (CA INDEX NAME)

CM 1

CRN 1499-55-4
CMF C6 H11 N O4
CDES 5:L

Absolute stereochemistry.

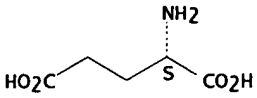


RN 25513-46-6 HCAPLUS
CN L-Glutamic acid, homopolymer (9CI) (CA INDEX NAME)

CM 1

CRN 56-86-0
CMF C5 H9 N O4
CDES 5:L

Absolute stereochemistry.

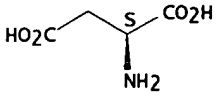


RN 25608-40-6 HCAPLUS
CN L-Aspartic acid, homopolymer (9CI) (CA INDEX NAME)

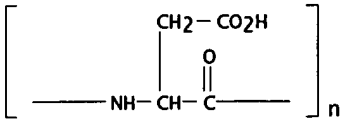
CM 1

CRN 56-84-8
CMF C4 H7 N O4

Absolute stereochemistry. Rotation (+).



RN 26063-13-8 HCAPLUS
CN Poly[imino[(1S)-1-(carboxymethyl)-2-oxo-1,2-ethanediyl]] (9CI) (CA INDEX NAME)



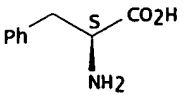
RN 26655-91-4 HCAPLUS

CN L-Glutamic acid, polymer with L-phenylalanine (9CI) (CA INDEX NAME)

CM 1

CRN 63-91-2
CMF C9 H11 N O2

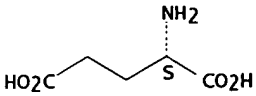
Absolute stereochemistry. Rotation (-).



CM 2

CRN 56-86-0
CMF C5 H9 N O4
CDES 5:L

Absolute stereochemistry.

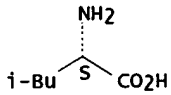


RN 31370-19-1 HCAPLUS
CN L-Glutamic acid, polymer with L-leucine (9CI) (CA INDEX NAME)

CM 1

CRN 61-90-5
CMF C6 H13 N O2

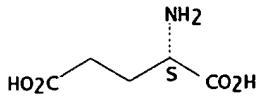
Absolute stereochemistry. Rotation (+).



CM 2

CRN 56-86-0
CMF C5 H9 N O4
CDES 5:L

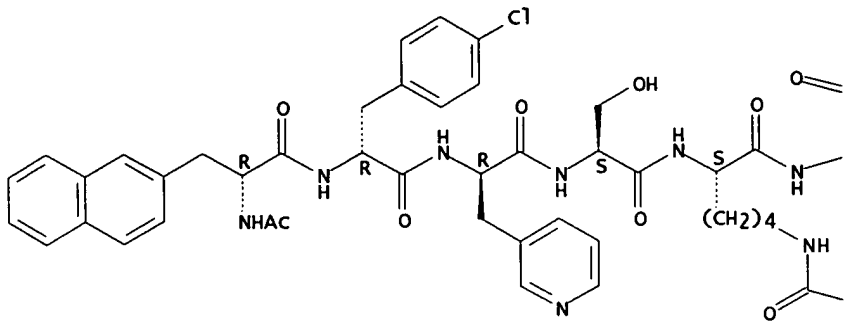
Absolute stereochemistry.



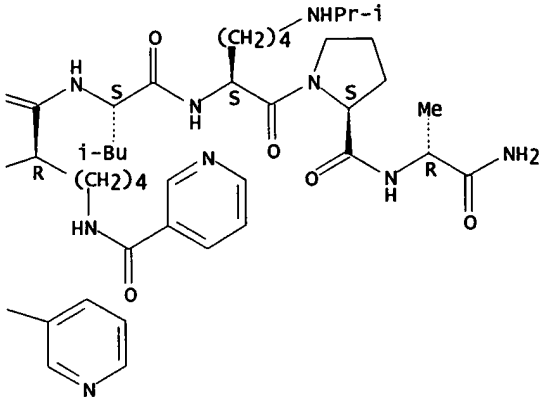
RN 112568-12-4 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-N6-(3-pyridinylcarbonyl)-L-lysyl-N6-(3-pyridinylcarbonyl)-D-lysyl-L-leucyl-N6-(1-methylethyl)-L-lysyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



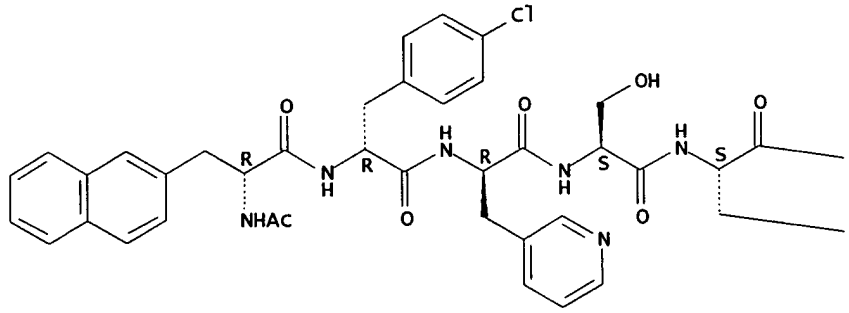
PAGE 1-B



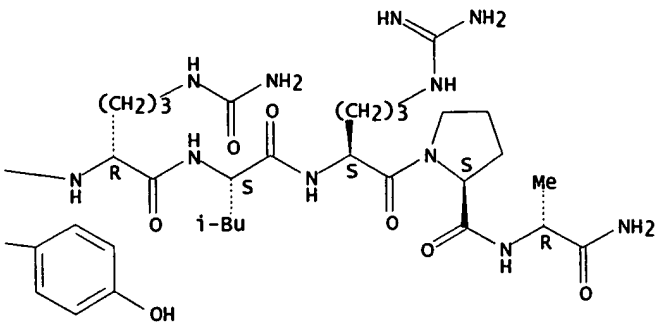
RN 120287-85-6 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-L-tyrosyl-N5-(aminocarbonyl)-D-ornithyl-L-leucyl-L-arginyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



PAGE 1-B

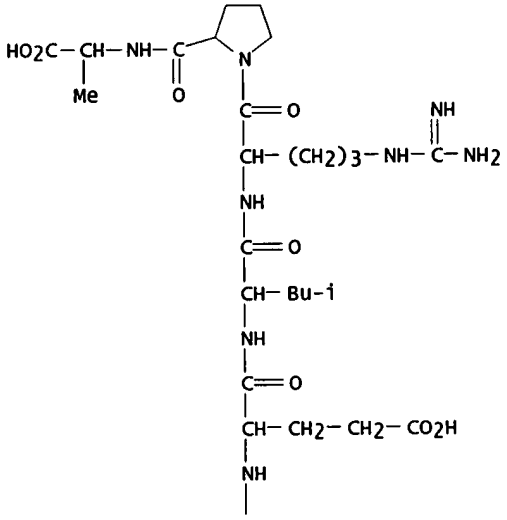


RN 121850-01-9 HCAPLUS
CN D-Alanine, N-[(3R)-3-[N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl]-1-oxooctadecyl]-L-seryl-L-arginyl-D-.alpha.-glutamyl-L-leucyl-L-arginyl-L-prolyl-, diacetate (salt) (9CI) (CA INDEX NAME)

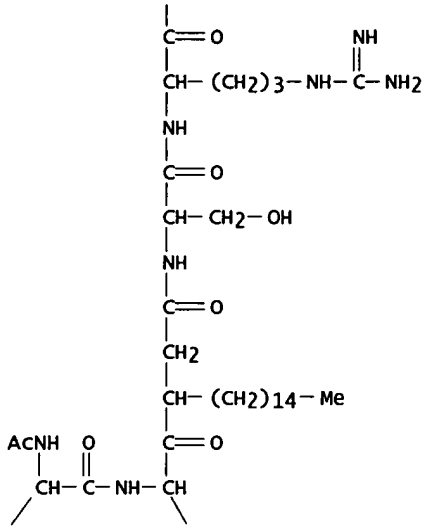
CM 1

CRN 121850-00-8
CMF C76 H116 Cl N15 O15
CDES *

PAGE 1-A



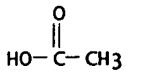
PAGE 2-A



PAGE 3-A

CM 2

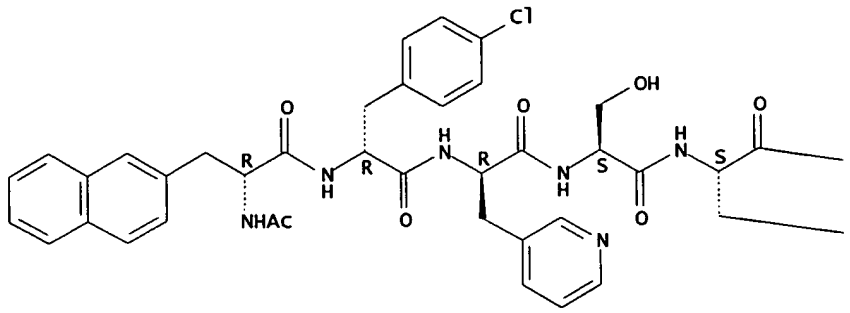
CRN 64-19-7
CMF C2 H4 O2



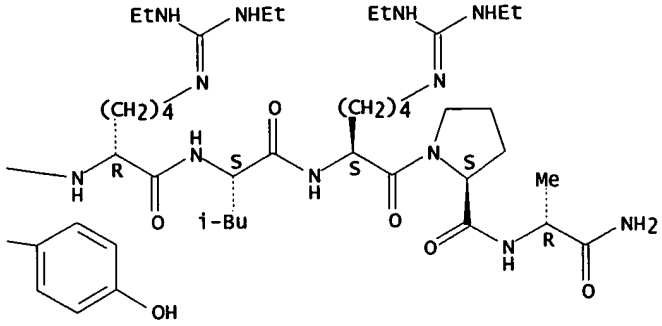
RN 124904-93-4 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-L-tyrosyl-N6-[bis(ethylamino)methylene]-D-lysyl-L-leucyl-N6-[bis(ethylamino)methylene]-L-lysyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



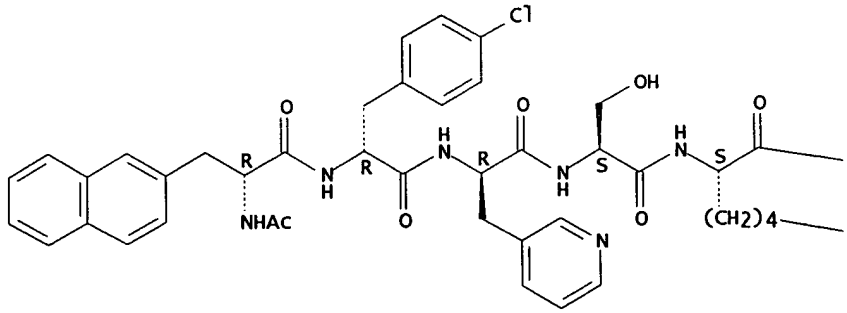
PAGE 1-B



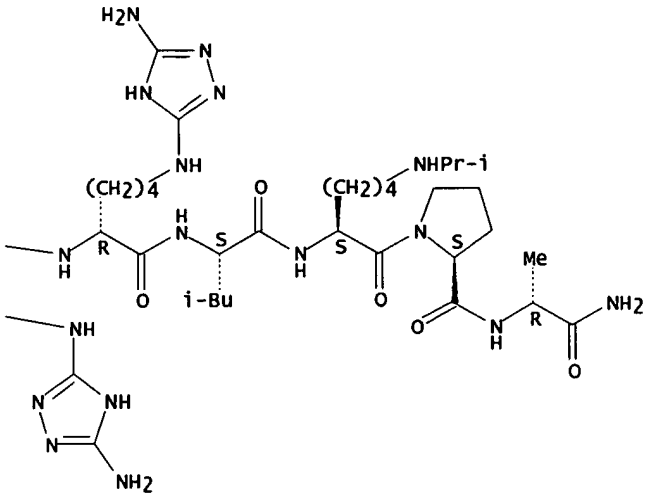
RN 134457-26-4 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-N6-(5-amino-1H-1,2,4-triazol-3-yl)-L-lysyl-N6-(5-amino-1H-1,2,4-triazol-3-yl)-D-lysyl-L-leucyl-N6-(1-methylethyl)-L-lysyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry. Rotation (-).

PAGE 1-A



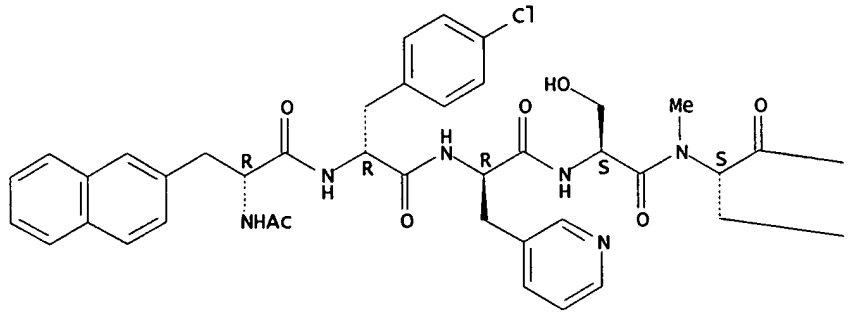
PAGE 1-B



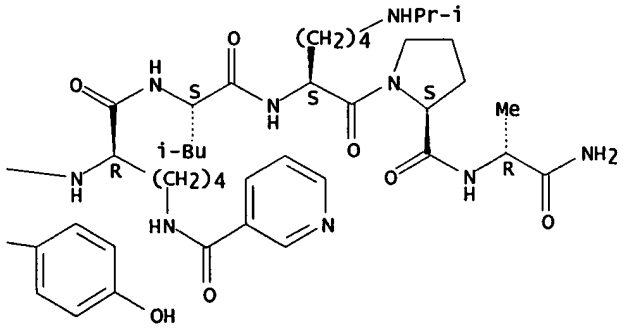
RN 135215-95-1 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-N-methyl-L-tyrosyl-N6-(3-pyridinylcarbonyl)-D-lysyl-L-leucyl-N6-(1-methylethyl)-L-lysyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



PAGE 1-B

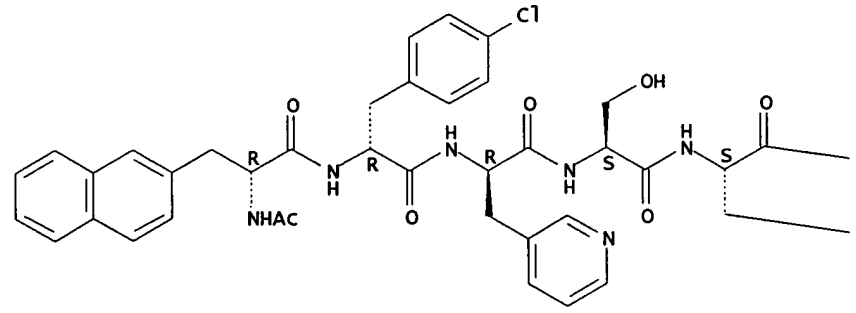


RN 151272-78-5 HCAPLUS

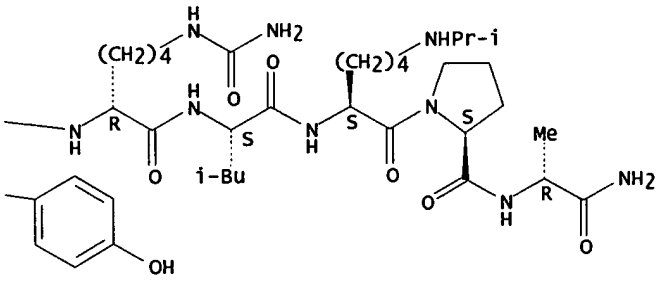
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-L-tyrosyl-N6-(aminocarbonyl)-D-lysyl-L-leucyl-N6-(1-methylethyl)-L-lysyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



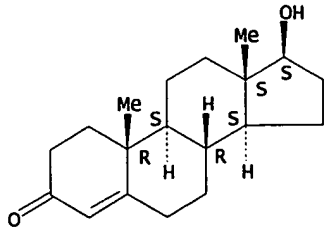
PAGE 1-B



IT 9034-40-6D, LH-RH, antagonists, complexes with poly(amino acids)
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(immobilized activity-stabilized LHRH antagonist complexes and their prodn.)
RN 9034-40-6 HCAPLUS
CN Luteinizing hormone-releasing factor (9CI) (CA INDEX NAME)

*** STRUCTURE DIAGRAM IS NOT AVAILABLE ***
IT 58-22-0, Testosterone
RL: MFM (Metabolic formation); BIOL (Biological study); FORM (Formation, nonpreparative)
(suppression of secretion of; immobilized activity-stabilized LHRH antagonist complexes and their prodn.)
RN 58-22-0 HCAPLUS
CN Androst-4-en-3-one, 17-hydroxy-, (17.beta.)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.



=> d bib abs hitstr 4

L12 ANSWER 4 OF 5 HCAPLUS COPYRIGHT 2001 ACS
AN 1998:293389 HCAPLUS
DN 129:1027
TI Use of LH-RH antagonists as diagnostic agents
IN Engel, Juergen; Diedrich, Klaus; Felberbaum, Ricardo
PA Asta Medica A.-G., Germany
SO PCT Int. Appl., 18 pp.
CODEN: PIXXD2
DT Patent
LA German
FAN.CNT 1

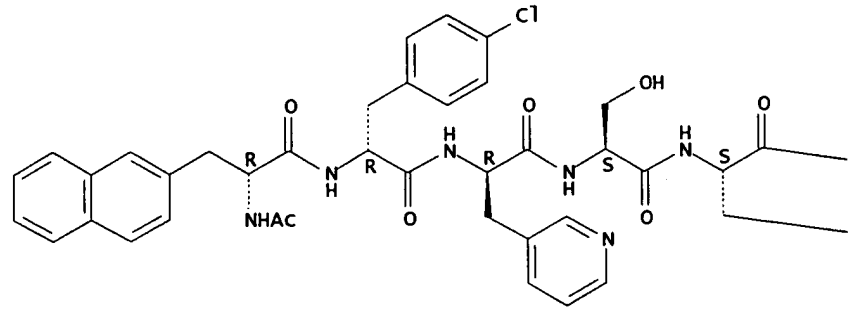
	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	WO 9818482	A1	19980507	WO 1997-DE2456	19971023
	W: AU, BR, HU, IL, JP, MX, NO, NZ, PL, RU, SG				
	RW: AT, BE, CH, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
	DE 19644994	A1	19980507	DE 1996-19644994	19961030
	AU 9852217	A1	19980522	AU 1998-52217	19971023
	AU 717538	B2	20000330		
	EP 938330	A1	19990901	EP 1997-947017	19971023
	R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				
	BR 9712456	A	19991019	BR 1997-12456	19971023
	JP 2001502702	T2	20010227	JP 1998-519885	19971023
	CA 2219641	AA	19980430	CA 1997-2219641	19971028
	US 6106805	A	20000822	US 1997-961085	19971030
	NO 9901920	A	19990422	NO 1999-1920	19990422
PRAI	DE 1996-19644994		19961030		
	WO 1997-DE2456		19971023		

AB A diagnostic agent for improving the effectiveness of hysteroscopy contains an LH-RH antagonist, esp. Cetrorelix, to cause rapid regression of the thickness of the endometrium and thereby improve hysteroscopic visualization of pathol. conditions. The agent is administration before hysteroscopy and/or in prepn. for operations, either in a single dose of 0.1-2 mg/kg or in multiple doses of 0.01-0.5 mg/kg by injection, preferably split over 1-14 days. The agent is further suitable for use in hysteroscopy with immediately following noninvasive therapy or surgery of pathol. conditions of the uterus such as myoma and endometrial hyperplasia.
IT 9034-40-6, LH-RH
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(antagonists; use of LH-RH antagonists as diagnostic agents)
RN 9034-40-6 HCAPLUS
CN Luteinizing hormone-releasing factor (9CI) (CA INDEX NAME)

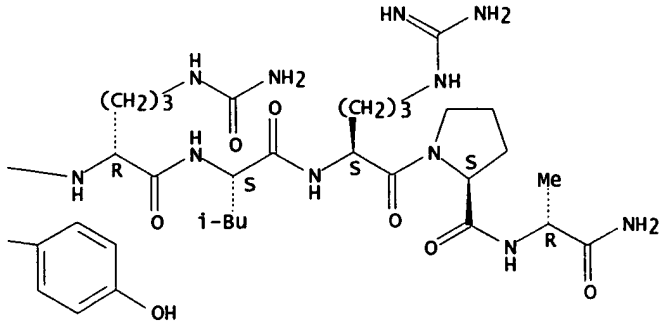
*** STRUCTURE DIAGRAM IS NOT AVAILABLE ***
IT 120287-85-6, Cetrorelix
RL: BAC (Biological activity or effector, except adverse); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(use of LH-RH antagonists as diagnostic agents)
RN 120287-85-6 HCAPLUS
CN D-Alaninamide, N-acetyl-3-(2-naphthalenyl)-D-alanyl-4-chloro-D-phenylalanyl-3-(3-pyridinyl)-D-alanyl-L-seryl-L-tyrosyl-N5-(aminocarbonyl)-D-ornithyl-L-leucyl-L-arginyl-L-prolyl- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

PAGE 1-A



PAGE 1-B



=> d bib abs hitstr 5

L12 ANSWER 5 OF 5 HCAPLUS COPYRIGHT 2001 ACS
AN 1998:29519 HCAPLUS
DN 128:162903
TI Antagonistic analogs of LHRH in oncology and gynecology
AU Schally, A. V.; Comaru-Schally, A. M.; Gonzalez-Barcena, D.; Reissmann, T.; Engel, J.
CS UK
SO Int. Congr., Symp. Semin. Ser. (1997), 13(Endometriosis Today), 401-413
CODEN: ICGSEM; ISSN: 0969-2622
PB Parthenon Publishing Group Ltd.
DT Journal; General Review
LA English
AB A review with 70 refs. LHRH antagonists, esp. cetrorelix, are reviewed along with their prospective clin. applicability to in vitro fertilization/embryo transfer, gynecol. oncol., fibroids, endometriosis and prostate disorders.
IT 9034-40-6, LHRH
RL: BPR (Biological process); BIOL (Biological study); PROC (Process)
(LHRH antagonist treatment in cancer and reproductive tract disorders in humans and lab. animals)
RN 9034-40-6 HCAPLUS
CN Luteinizing hormone-releasing factor (9CI) (CA INDEX NAME)

*** STRUCTURE DIAGRAM IS NOT AVAILABLE ***

=> d bib abs hitrn 1

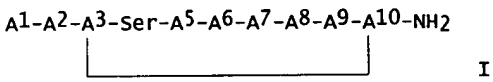
L47 ANSWER 1 OF 7 HCAPLUS COPYRIGHT 2001 ACS
AN 1998:200802 HCAPLUS
DN 128:268963
TI Presence and characteristics of receptors for [D-Trp6]luteinizing hormone releasing hormone and epidermal growth factor in human ovarian cancer
AU Srkalovic, Gordan; Schally, Andrew V.; Wittliff, James L.; Day, Thomas G., Jr.; Jenison, Eric L.
CS Endocrine, Polypeptide and Cancer Institute, Veterans Affairs Medical Center and Department of Medicine, Tulane University Medical School, New Orleans, LA, USA
SO Int. J. Oncol. (1998), 12(3), 489-498
CODEN: IJONES; ISSN: 1019-6439
PB International Journal of Oncology
DT Journal
LA English
AB This study was undertaken to establish the presence and characteristics of receptors for [D-Trp6]LH-RH on the membranes of human ovarian cancer. Specific binding of [125I, D-Trp6]LH-RH was found in 29 of 37 (78.4%) ovarian cancers and in 6 of 11 (54.5%) non-malignant human ovaries. Ligand binding was dependent on time and plasma membrane concn. in a fashion expected of a peptide hormone. Satn., kinetic and displacement data were consistent with the presence of a highly specific, single class of non-cooperative binding site. On the basis of receptors affinity, LH-RH-receptor-pos. ovarian cancers could be divided into two groups: high affinity group (Kd=2.71.+-.0.60 nM; Bmax=0.46.+-.0.07 pmol/mg membrane protein) comprising 55% of tumors, and low affinity group (Kd=78.0.+-. 19.6 nM; Bmax=9.44.+-.2.68 pmol/mg membrane protein) which included 45% of tumors. LH-RH antagonist Cetrorelix showed an affinity to LH-RH receptors on ovarian cancers 14 times higher than the agonist [D-Trp6]LH-RH. Using 125I-epidermal growth factor, specific high affinity receptors were also detected in membranes from 13 of 24 (54%) ovarian cancers and 5 of 11 (45%) non-malignant ovaries. The demonstration of LH-RH receptors in human ovarian cancers provides a rationale for the use of therapeutic approaches based on LH-RH analogs in this malignancy. The probable involvement of growth factors in the development of ovarian cancers suggests the merit of trying a combined therapy based on analogs of LH-RH and somatostatin for this carcinoma.
IT 120287-85-6, Cetrorelix
RL: BAC (Biological activity or effector, except adverse); BPR (Biological process); BIOL (Biological study); PROC (Process)
(LH-RH receptors and EGF receptors characterization in human ovarian cancer cells)

=> d bib abs hitrn 2

L47 ANSWER 2 OF 7 HCAPLUS COPYRIGHT 2001 ACS
AN 1995:994992 HCAPLUS
DN 124:118001
TI Preparation of cyclic peptides as luteinizing hormone-releasing hormone (LHRH) antagonists
IN Sauer, Daryl R.; Haviv, Fortuna
PA Abbott Laboratories, USA
SO PCT Int. Appl., 50 pp.
CODEN: PIXXD2
DT Patent
LA English
FAN.CNT 1

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	WO 9524424	A1	19950914	WO 1995-US2410	19950227
	W: CA, JP, MX				
	RW: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
	US 5508383	A	19960416	US 1994-208544	19940309
PRAI	US 1994-208544		19940309		

OS MARPAT 124:118001
GI



I

AB A class of cyclic peptides [I; A1 = N-acetyl-3-(naphth-2-yl)-, (quinolin-3-yl)-, (4-chlorophenyl)-, or (naphth-1-yl)-D-Ala, Ac-D-Phe; A2 = 3-(4-chlorophenyl)-, (naphth-3-yl)-, or (4-fluorophenyl)-D-Ala, D-Phe; A3 = D- or L-Lys, Orn, or Glu, D-homo-Lys or Glu, D-2,3-diaminopropionyl, D-Asp; A5 = Tyr, MeTyr, 4-(3-amino-1,2,4-triazol-5-yl)-L-Phe, Phe, Tyr(Me), N.epsilon.-nicotinyl- or picolyl-L-Lys, L-2-aminoguanidinohexanoic acid; A6 = N.epsilon.-nicotinyl-, pyrazinyl-, (nicotinylglycyl)-, (6-aminonicotinyl)-, (azaglycylnicotinyl)-, or (azaglycyl-2-furoyl)-L-Lys, 4-(3-amino-1,2,4-triazol-5-yl)-L-Phe, D-(homo)citrullyl, N.delta.-(6-aminonicotinyl)-Orn, D-2-amino-6-NG,NG-diethylguanidinohexanoic acid; A7 = Leu, MeLeu, Ile, Val; A8 = Lys(iso-Pr), Arg, L-2-aminoguanidinohexanoic acid, homocitrullyl, D-2-amino-6-NG,NG-diethylguanidinohexanoic acid, A9 = Pro, MeAla, Gly, Sar; A10 = D- or L-Glu, Lys, or Orn, D-homo-Lys or Glu, D-2,3-diaminopropionyl; provisos are given] are prepd. These cyclopeptides are effective inhibitors of LHRH and are useful in the treatment of disease conditions which are mediated by sex hormones including prostate cancer, endometriosis, uterine fibroids, and precocious puberty. Thus, Ac-D-2Nal-D-4ClPhe-c-[D-Lys-Ser-MeTyr-D-Lys(nicotinyl)-Leu-Lys(N.epsilon.-iso-Pr)-Pro-D-Glu]-NH2 [II; wherein D-2Nal = 3-(naphth-3-yl)-D-Ala, D-4ClPhe = 4-chloro-D-Phe] was prepd. by the solid-phase method on a Milligen-Biosearch 9500 peptide synthesizer, which involved sequential coupling of Boc-D-Glu(OBzl)-OH, Boc-Pro-OH, Boc-Lys(N.epsilon.-Z, iso-Pr), Boc-Leu-OH, Boc-D-Lys(N.epsilon.-nicotinyl)-OH, Boc-MeTyr(2,6-Cl2-Bzl)-OH, Boc-Ser(Bzl), Boc-D-4ClPhe-OH, and Boc-D-2Nal-OH, and AcOH to a 4-methylbenzhydrylamine resin, resin-cleavage and deprotection with HF(l) contg. anisole, and cyclization of the resulting linear peptide with (PhO)2P(O)N3 and (Me2CH)2NEt in DMF. In the LHRH antagonist assay described by F. Haviv (J. Med. Chem., 1989), II showed the pA2 value of 10.16 (pA2 = the neg. logarithm of the concn. of the particular antagonist test compd. required to shift the response curve produced by the agonist leuprolide to 2-fold higher concn.).

=> d bib abs hitrn 3

L47 ANSWER 3 OF 7 HCAPLUS COPYRIGHT 2001 ACS
AN 1991:401098 HCAPLUS
DN 115:1098
TI Spontaneous and steroid-induced recurrence of endometriosis after suppression by a gonadotropin-releasing hormone antagonist in the rat
AU Sharpe, Kathy L.; Bertero, Maria C.; Muse, Kenneth N.; Vernon, Michael W.
CS Kentucky Cent. Reprod. Med., Univ. Kentucky, Lexington, KY, 40536, USA
SO Am. J. Obstet. Gynecol. (1991), 164(1, Pt. 1), 187-94
CODEN: AJOGAH; ISSN: 0002-9378
DT Journal
LA English
AB Recurrent endometriosis in women is difficult to study because of the ethical consideration of performing repeated surgeries. Therapeutic regression of endometriosis with the gonadotropin-releasing hormone antagonist antide was previously described. Here the spontaneous and steroid-induced recurrence of endometriosis was described after withdrawal from antide therapy. Rats with endometriosis received antide or vehicle on days 0 (proestrus), 3, 6, and 9 and were killed on days 0, 6, 12, 18, 24, 30, and 42. Addnl. antide-treated rats received estrogen, progesterone, both estrogen and progesterone, cholesterol, and no steroid on day 9 and were killed on day 12. Antide suppressed endometriotic implant size on days 12, 18, and 24,. However, implant size spontaneously returned to pretreatment values by day 30. Administration of steroids on day 9 elicited regrowth of antide-suppressed endometriosis (estrogen plus progesterone greater than estrogen, progesterone, or cholesterol greater than no steroid) by day 12. This resilience of endometriosis offers an explanation for treatment failure and recurrence of the disease in women.
IT 112568-12-4, Antide
RL: BIOL (Biological study)
(endometriosis suppression by, recurrence of, sex steroids in)

=> d bib abs hitrn 4

L47 ANSWER 4 OF 7 HCAPLUS COPYRIGHT 2001 ACS
AN 1990:92588 HCAPLUS
DN 112:92588
TI LH-RH antagonist analogs and 19
-norprogestational steroids for treatment of gynecological disorders
IN Vickery, Brain H.
PA Syntex (U.S.A.), Inc., USA
SO Eur. Pat. Appl., 31 pp.
CODEN: EPXXDW
DT Patent
LA English
FAN.CNT 1

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	EP 301850	A2	19890201	EP 1988-306947	19880728
	EP 301850	A3	19901031		
	R: AT, BE, CH, DE, ES, FR, GB, GR, IT, LI, LU, NL, SE				
	AU 8820124	A1	19890202	AU 1988-20124	19880728
PRAI	US 1987-80518		19870731		

OS MARPAT 112:92588
AB Compns. are given for treatment of gynecol. disorders (no data), comprising an LH-RH antagonist and a progestational agent. The LH-RH antagonist N-Ac-D-Nal(2)-D-p-Cl-Phe-D-Pal(3)-Ser-hArg(CH2CF3)2-D-Tyr-Leu-hArg(CH2CF3)2Pro-D-Ala-NH2 [Nal(2) = 3-(2-naphthyl)-Ala; Pal(3) = 3-(3-pyridyl)-Ala; hArg(CH2CF3) = N,N'-guanidino-bis(2,2,2-trifluoroethyl)homoarginyl] was prepd. by the Merrified method, using a benzhydrylamino-polystyrene resin. A formulation for nasal administration comprised progestagen 35, LH-RH antagonist 50 mg, 0.02M acetate buffer 5 mL, Na glycolate 500 mg and 0.02M acetate buffer (pH 5.2) to 10 mL. Suitable progestational agents are norethindrone, ethynodiol, norgestrel, etc. Uses include treatment of endometriosis, breast cancer, uterine leiomyoma, and precocious puberty.

=> d bib abs hitrn 5

L47 ANSWER 5 OF 7 HCAPLUS COPYRIGHT 2001 ACS
AN 1987:169376 HCAPLUS
DN 106:169376
TI The effect of a luteinizing hormone-releasing hormone antagonist on experimental endometriosis in the rat
AU Jones, Robert C.
CS Res. Div., Wyeth Lab. Inc., Philadelphia, PA, 19101, USA
SO Acta Endocrinol. (Copenhagen) (1987), 114(3), 379-82
CODEN: ACENA7; ISSN: 0001-5598
DT Journal
LA English
AB The effect of [1-[N-acetyl-3-(2-naphthalenyl)-D-alanine],2-(4-fluoro-D-phenylalanine),D-Trp3,D-Arg6]-LH-RH (I) [86855-16-5] on growth of endometrial explants was studied in intact female rats. The s.c. injection of I was begun 3 wk after transplantation of a section of endometrium to the peritoneal wall. The animals were laparotomized and the vol. of the explant (length .times. width .times. height) in mm was measured with calipers on day 1 of treatment. The animals were injected daily for 3 wk with 50, 250, or 500 .mu.g of I at which time the animals were again laporatomized and the vol. of the explant measured. At 8 wk after cessation of treatment the animals were sacrificed and the vol. of the explant measured. The degree of inhibition of explant growth was directly correlated with the amt. of I administered; a significant inhibition was obtained with doses of 250 or 500 .mu.g. At 8 wk after cessation of treatment all explants demonstrated renewed growth, although explants in rats which had been treated with 250 or 500 .mu.g had returned to only 51 and 61% of their initial vol., resp. Thus, LH-RH antagonists may be useful in the treatment of endometriosis although at doses considerably higher than those of the super agonists.

=> d bib abs hitrn 6

L47 ANSWER 6 OF 7 HCAPLUS COPYRIGHT 2001 ACS
AN 1985:606992 HCAPLUS
DN 103:206992
TI Comparison of the subcutaneous and intranasal administration of an LH-RH antagonist ([N-Ac-D-p-Cl-Phe1,2,D-Trp3, D-Arg6,D-Ala10]-LH-RH) in the rhesus monkey
AU Asch, R. H.; Balmaceda, J. P.; Neves de Castro, M.; Schally, A. V.
CS Health Sci. Cent., Univ. Texas, San Antonio, TX, 78284, USA
SO Adv. Contracept. (1985), 1(2), 109-17
CODEN: ADCOEB
DT Journal
LA English
AB The effect of 2 routes of administration: (s.c.), 0.5, 0.2, and 1 mg; and intrasal (i.n.), 0.2, 1, and 5 mg of an LH-RH antagonist, ORG 30276 ([N-Ac-D-p-Cl-Phe1,2,D-Trp3,D-Arg6,D-Ala10]-LH-RH) [83539-08-6] on gonadotropin levels were compared in oophorectomized monkeys. One hour after s.c. administration, FSH [9002-68-0] and LH [9002-67-9] values exhibited a dose-dependent fall that lasted for up to 12 h. After s.c. administration, the max. inhibition of serum FSH and LH was 29 and 41% (0.2 mg dose) and 41 and 58% (1 mg dose), resp. After i.n. administration, max. inhibition of serum FSH and LH was 19 and 40% (1 mg) and 32 and 53% (5 mg), resp. These decreases were dose-related and lasted for up to 12 h. The bioavailability of the i.n. route vs. the s.c. route ranged 16-26%. This high effectiveness of the i.n. route in terms of bioavailability is markedly greater than that previously reported for LH-RH agonists (1%) and is probably due to a resistance to enzymic hydrolysis in the nasal mucosa. Evidently, antagonists of LH-RH can be administered by routes other than parenteral, increasing their potential clin. use in conditions in which inhibition of gonadotropins is desired, as in contraception and in therapy for endometriosis, preococious puberty, and hormone-dependent neoplasms.

=> d bib abs hitrn 7

L47 ANSWER 7 OF 7 HCAPLUS COPYRIGHT 2001 ACS
AN 1982:1317 HCAPLUS
DN 96:1317
TI Composition containing LH-RH or its antagonists
IN Labrie, Fernand; Raynaud, Jean Pierre
PA Roussel-UCLAF , Fr.
SO Fr. Demande, 24 pp.
CODEN: FRXXBL
DT Patent
LA French
FAN.CNT 1

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PI	FR 2465486	A1	19810327	FR 1979-23545	19790921
	FR 2465486	B1	19830527		
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	BE 885308	A1	19810319	BE 1980-202163	19800919
	AU 8062565	A1	19810409	AU 1980-62565	19800919
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US 1989-334088 19890405
US 1989-334086 19890406
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US 1994-347054 19941130

AB Compns. contg. LH-RH and agonists of the structure p-Glu-His-Trp-Ser-Tyr-X-Y-Arg-Pro-Z in which Z = Gly-NH2, NH alkyl where the alkyl radical contains 1-3 C atoms, NH cyclopropyl, -NH-CH2-CH2-OH, pyrrolidinyl or morpholino; Y = Leu, N-.alpha.Me-Leu, Ser, Cys, Asp, Glu, Orn or Lys; and X = Gly, D-N-Leu, D-N-Val, D-.alpha.-aminobutyric acid, D-Phe, D-Ser, D-Thr, D-Met, D-Pgl, D-Lys, Leu, Ile, Nle, Val, N-Val, Met, Phe, D-Leu, D-Arg, D-Lys, D-Orn, D-Trp, Trp, 2-Me-Ala, D-Tyr, .epsilon.-lauryl-D-Lys, .epsilon.-dextran-D-Lys, D-Ala or Ala are proposed for treatment of adenocarcinoma and benign hypertrophy of the prostate gland, endometriosis, dysmenorrhea, hirsutism, hormone-dependent mammary tumors, for prevention of precocious puberty and to delay puberty onset in males and for the treatment of acne in females. Intranasal administration of 500 .mu.g [D-Ser6, des-Gly10]LH-RH ethylamide (I) [54060-47-8] to healthy males increased plasma LH [9002-67-9] and FSH [9002-68-0] levels and inhibited testicular steroidogenesis. Similar administration of I to normally cycling females decreased serum progesterone [57-83-0]. Injection of 20-500 ng I s.c. to rats together with an antiandrogen induced changes in the wt. of the seminal vesicles and prostate gland similar to those obsd. after castration.

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L47 ANSWER 7 OF 7 HCAPLUS COPYRIGHT 2001 ACS
IC A61K037-38
CC 2-9 (Mammalian Hormones)
Section cross-reference(s): 63
ST LHRH agonist blood gonadotropin testis steroid; progesterone blood serum
LHRH agonist; antiandrogen LHRH agonist prostate seminal vesicle
IT Acne
Dysmenorrhea
Hirsutism
(LH-RH and agonists treatment of)
IT Blood plasma
(gonadotropins and steroids of, LH-RH and agonists effect on)
IT Androgens
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(inhibitors, prostate gland and seminal vesicle atrophy from)
IT Steroids, biological studies
RL: BIOL (Biological study)
(of blood plasma, LH-RH and agonists effect on)
IT Neoplasm
(of mammary gland, LH-RH and agonists treatment of)
IT Prostate gland
Seminal vesicle
(wt. of, antiandrogen and LH-RH agonists decrease of)
IT Carcinoma
(adeno-, of prostate gland, LH-RH and agonists treatment of)
IT Prostate gland
(disease, benign hyperplasia, LH-RH and agonists treatment of)
IT Puberty
(disorder, precocious, LH-RH and agonists treatment of)
IT Uterus, disease or disorder
(endometriosis, LH-RH and agonists treatment of)
IT Puberty
(male, onset of, LH-RH and agonists inhibition of)
IT Mammary gland
(neoplasm, LH-RH and agonists treatment of)
IT Prostate gland
(neoplasm, adenocarcinoma, LH-RH and agonists treatment of)
IT 54060-47-8
RL: BIOL (Biological study)
(blood plasma steroids and gonadotropins response to and prostate and seminal vesicle atrophy from antiandrogen and)
IT 9034-40-6D, agonists
RL: BIOL (Biological study)
(compns. contg., hormone-dependent disease treatment with)
IT 50-28-2, biological studies 57-83-0, biological studies 58-22-0
68-96-2 145-13-1 387-79-1 521-17-5 521-18-6 9002-67-9
9002-68-0
RL: BIOL (Biological study)
(of blood plasma, LH-RH agonists effect on)